

GENERAL FORM

DO NOT REPORT AIRCRAFT ACCIDENTS AND CRIMINAL ACTIVITIES ON THIS FORM. ACCIDENTS AND CRIMINAL ACTIVITIES ARE NOT INCLUDED IN THE ASRS PROGRAM AND SHOULD NOT BE SUBMITTED TO NASA. ALL IDENTITIES CONTAINED IN THIS REPORT WILL BE REMOVED TO ASSURE COMPLETE REPORTER ANONYMITY.

IDENTIFICATION STRIP: Please fill in all blanks to ensure return of strip. NO RECORD WILL BE KEPT OF YOUR IDENTITY. This section will be returned to you.

TELEPHONE NUMBERS where we may reach you for further details of this occurrence.



HOME [] HOURS [] OTHER [] HOURS []

NAME (required) [] TYPE OF EVENT/SITUATION [] ADDRESS/PO BOX (required) [] DATE OF OCCURRENCE (MM/DD/YYYY) [] ADDRESS [] MM/DD/YYYY [] LINE 2 [] LOCAL TIME (24 HR. CLOCK) [HH:MM] [] CITY (required) [] STATE [] ZIP (required) [] HH:MM []

PLEASE FILL IN APPROPRIATE SPACES AND CHECK ALL ITEMS WHICH APPLY TO THIS EVENT OR SITUATION.

REPORTER [Reset] FLYING TIME (IN HOURS) Total Time: [] hrs Last 90 Days: [] hrs Time in [] hrs Type: []

CERTIFICATES & RATINGS ATC EXPERIENCE [Reset] (Select Certificate) [] FPL [] Developmental [] Flight Instructor [] Instrument [] Multiengine [] Flight Engineer [] Other: [] Radar [] yrs Supervisory [] yrs Non-Radar [] yrs Military [] yrs

AIRSPACE CONDITIONS / WEATHER ELEMENTS LIGHT / VISIBILITY ATC / ADVISORY SVC. Class A [] Class B [] Class C [] Class D [] Class E [] Class G [] Special Use [] TFR [] (Select Condition) [] Fog [] Snow [] Hail [] Thunderstorm [] Haze/Smoke [] Turbulence [] Icing [] Windshear [] Rain [] Other: [] (Select Light) [] Ceiling: [] feet Visibility: [] miles RVR: [] feet (Select ATC) [] ATC Facility Name: []

AIRCRAFT 1 [] (Make / Model, e.g. B737, NOT N #, Your Aircraft Type [] Fit #, etc) Operator FAR Part (Select FAR Part) [] Other: [] Operator (Select Operator) [] Other: [] Mission (Select Mission) [] Other: [] Flight Plan (Select Flight Plan) [] Flight Phase (Select Flight Phase) [] Other: [] Route in Use Direct [] Visual Approach [] Oceanic [] None [] Vectors [] Other: [] Airway (ID): [] STAR (ID): [] SID (ID): [] IF MORE THAN ONE AIRCRAFT WAS INVOLVED, PLEASE ADD AN ADDITIONAL AIRCRAFT. Add Aircraft

LOCATION [Reset] CONFLICTS [Reset] Altitude: [] (single value) [] MSL [] AGL [] Distance: [] and/or Radial: (bearing) [] from: [] Airport [] ATC Fac [] Intersection [] NAVAID [] Estimated miss distance in feet: Horizontal [] Vertical [] Was evasive action taken? [] Yes [] No Was TCAS a factor? [] TA [] RA [] No Did terrain warning system activate? [] Yes [] No

DESCRIBE EVENT/SITUATION Keeping in mind the topics shown below, discuss those which you feel are relevant and anything else you think is important. Include what you believe really caused the problem, and what can be done to prevent a recurrence, or correct the situation. []

CHAIN OF EVENTS HUMAN PERFORMANCE CONSIDERATIONS - How the problem arose - How it was discovered - Contributing factors - Corrective actions - Perceptions, judgements, decisions - Actions or inactions - Factors affecting the quality of human performance

Reset Form View Printable Format Submit Report

From the NASA Aviation Safety Reporting System: NASA has established an Aviation Safety Reporting System (ASRS) to identify issues in the aviation system which need to be addressed. The program of which this system is a part is described in detail in FAA Advisory Circular 00-46F. Your assistance in informing us about such issues is essential to the success of the program. Please fill out this form as completely as possible. The information you provide on the identity strip will be used only if NASA determines that it is necessary to contact you for further information. THIS IDENTITY STRIP WILL BE RETURNED DIRECTLY TO YOU. The return of the identity strip assures your anonymity. Section 91.25 of the Federal Aviation Regulations (14 CFR 91.25) prohibits reports filed with NASA from being used for FAA enforcement purposes. This report will not be made available to the FAA for civil penalty or certificate actions for violations of the Federal Air Regulations. Your identity strip, stamped by NASA, is proof that you have submitted a report to the Aviation Safety Reporting System. We can only return the strip to you if you have provided a mailing address. Equally important, we can often obtain additional useful information if our safety analysts can talk with you directly by telephone. For this reason, we have requested telephone numbers where we may reach you. NOTE: Aircraft accidents should not be reported on this form. Such events should be filed with the National Transportation Safety Board as required by NTSB Regulation 830.5 (49CFR830.5). Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. The OMB control number for this information collection is 2700-0172. We estimate that it will take about 30 minutes to read the instructions, gather the facts, and answer the questions. You may send comments on our time estimate above to: P.O. Box 189 Moffett Field, CA 94035-0189. Thank you for your contribution to aviation safety.